

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: KIDS STUFF PRESCHOOL	Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/> Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Night <input type="checkbox"/> Group <input type="checkbox"/>
Physical Address: 320 HILLCREST ROAD MOBILE, AL 36608	Mailing Address:
Telephone Number: (251) 343-6611	Licensee: D & M LLC
Capacity: 72	Director: FELICIA JOHNS
Age Range: 18 Months to 5 Years	Date Prepared: 6/30/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
Failed - Immunization Certificate, Child Checklist Plan of Action - Getting parents to get ASAP	7/14/2026
Failed - Immunization Certificate, Child Checklist Plan of Action - Getting parents to get it ASAP	7/14/2026
Failed - Immunization Certificate, Child Checklist Plan of Action - Getting parents to get it ASAP	7/14/2026
Failed - Hazardous substances locked, Classroom Checklist / FOUR'S Plan of Action - Hazards were locked in cabinet.	6/30/2026
Failed - Hazardous substances locked, Classroom Checklist / TWO A Plan of Action - Hazards were put in the cabinet.	6/30/2026
Failed - Hazardous substances locked, Classroom Checklist / TWO B Plan of Action - Hazards were locked in cabinet.	6/30/2026
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Plan of Action - Ants were killed and taken care off	6/30/2026